



BREASTFEEDING DATA REPORT

2022





Breastfeeding is a journey. There are ups and downs and feelings of accomplishment and frustration. Michigan WIC is there to help every step of the way, no matter what stage of the breastfeeding journey you're in.

-USDA WIC

Breastfeeding Support



TABLE OF CONTENTS

5

Trends in Breastfeeding

Initiation, duration, and exclusivity

8

Disparity in Breastfeeding Rates

Michigan PRAMS comparison

11

Local Agency Maps

Breastfeeding statistics by local agency

16

Breastfeeding Barriers

Top barriers for initiation and continuation

18

Breastfeeding Peer Counselors

20

Trainings and Certifications

for WIC staff

23

Appendix

Data Resources

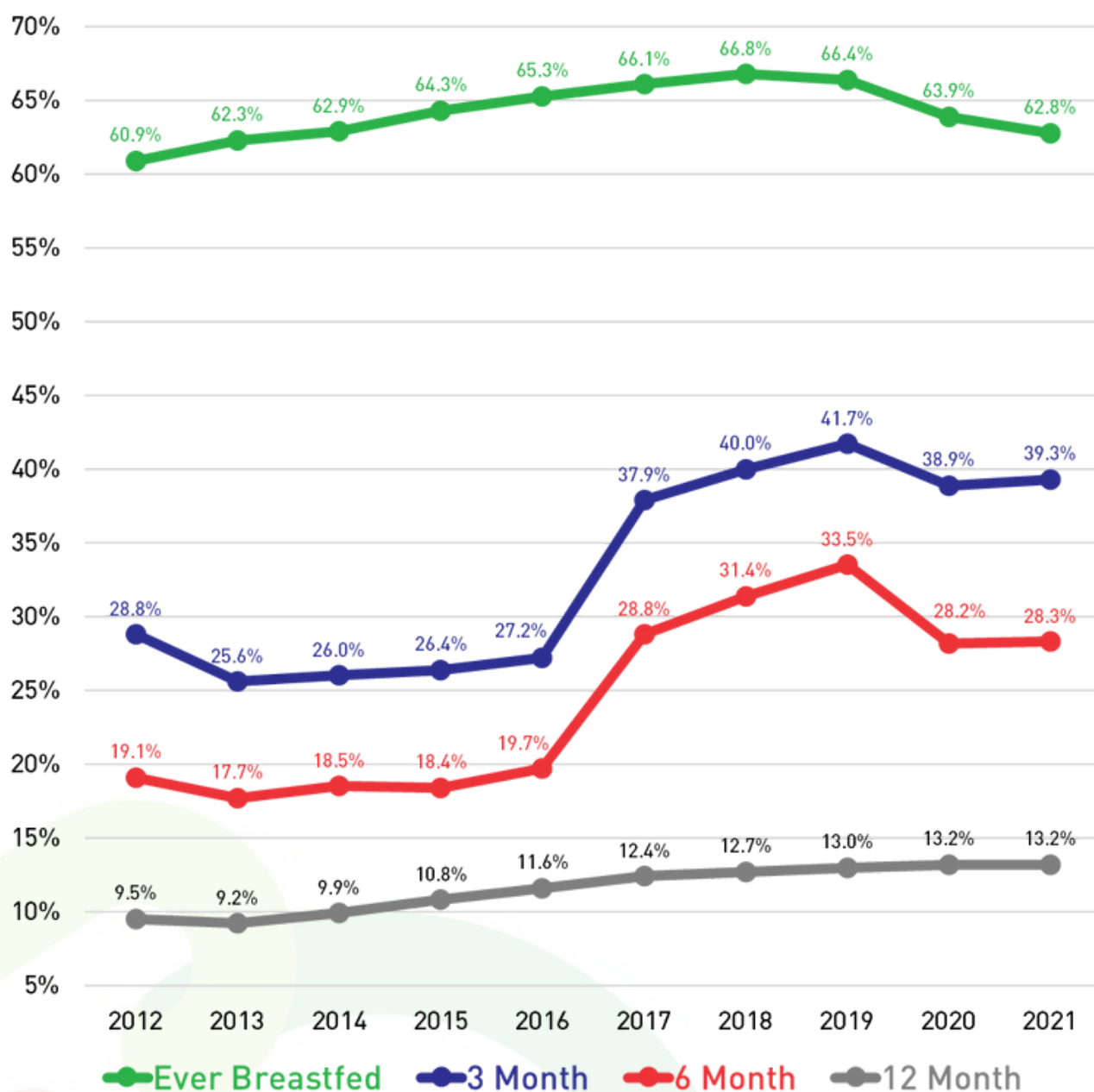


DID YOU KNOW?

A full-term infant typically increases their daily crying around two weeks of age. This is a normal surge in development, but may contribute to increased postpartum depression and less breastfeeding.

TRENDS IN BREASTFEEDING

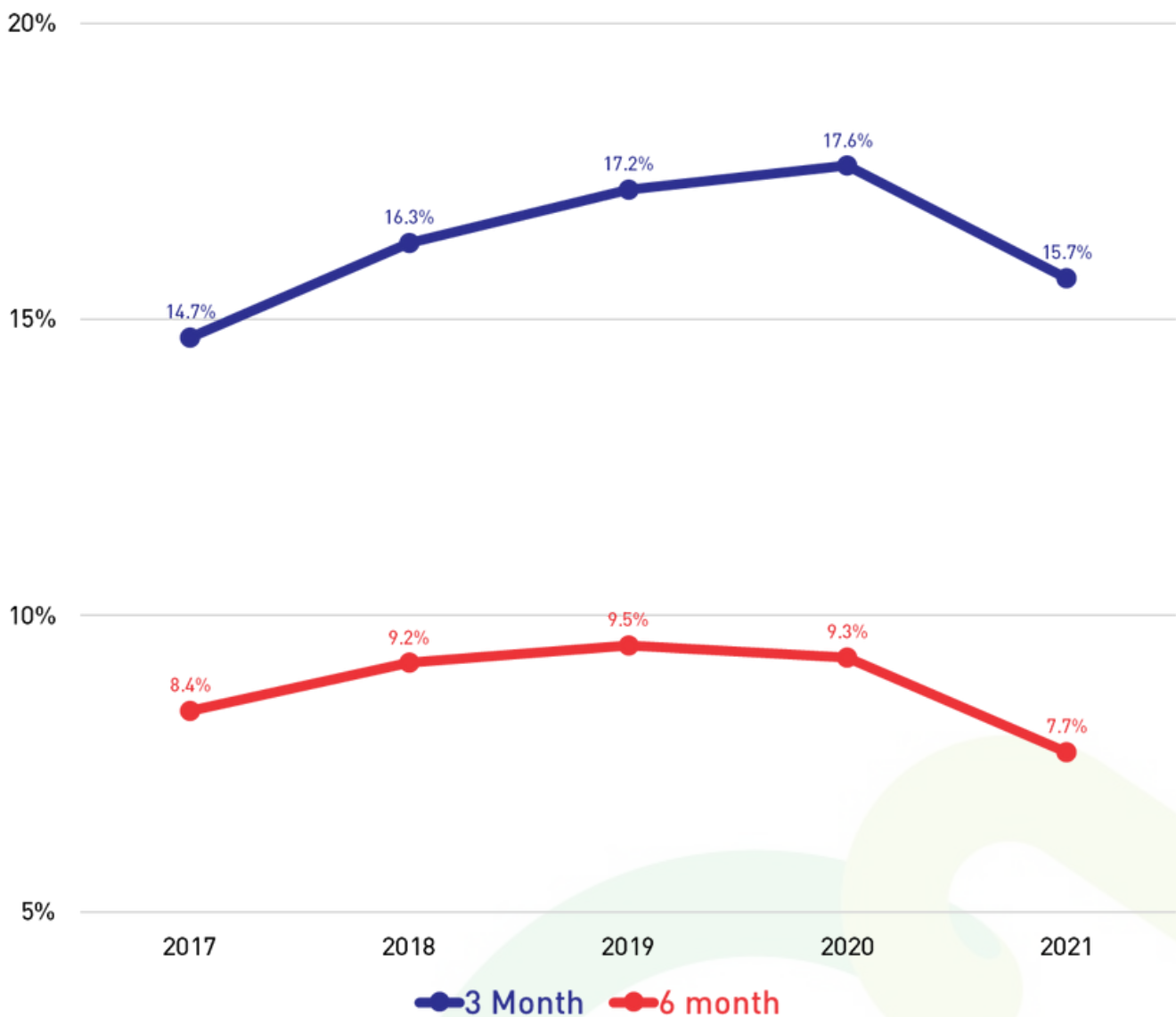
WIC Initiation and Duration



Source: Michigan PedNSS 2012-2021

TRENDS IN BREASTFEEDING

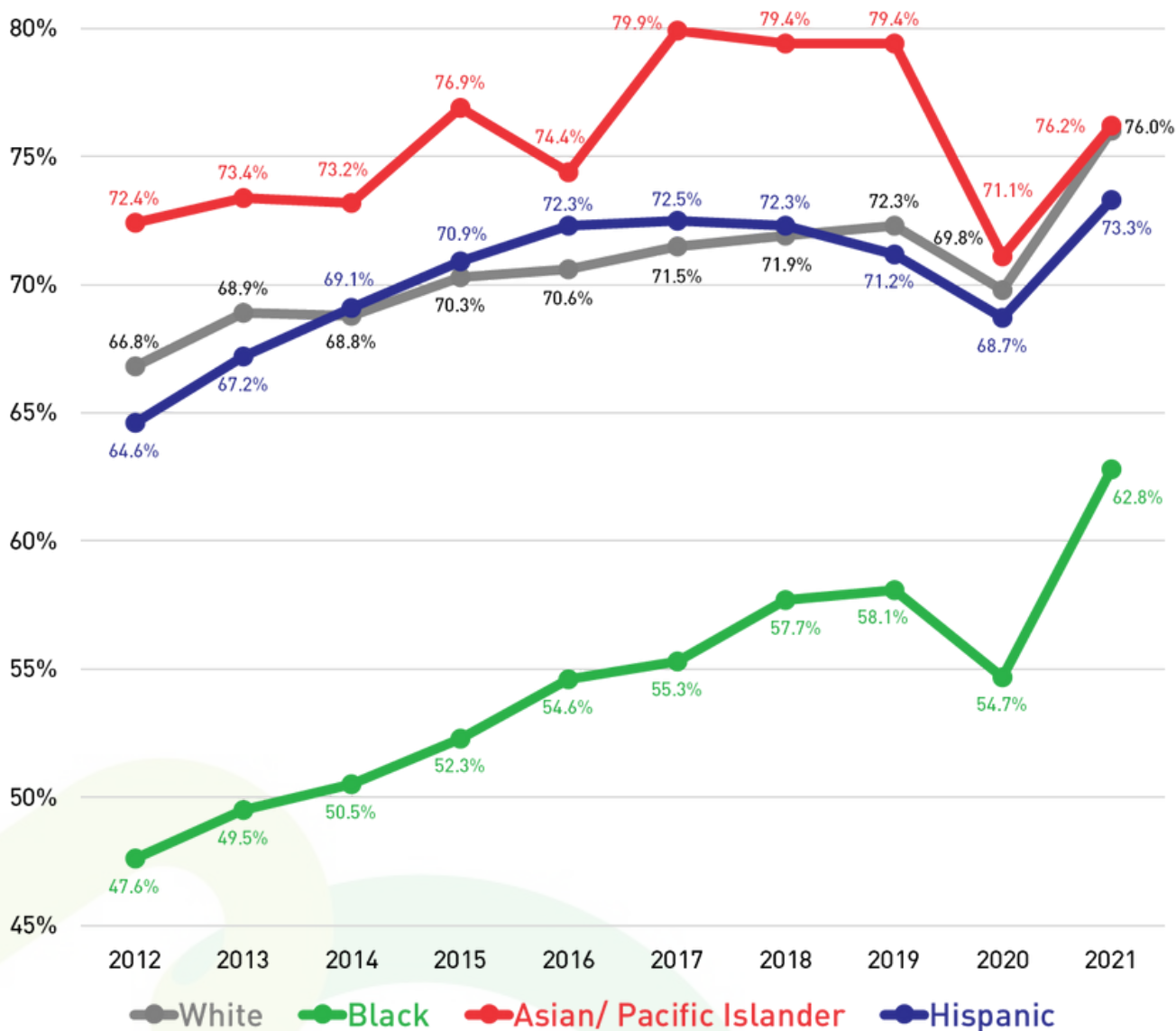
WIC Exclusivity



Source: Michigan PedNSS 2017-2021

TRENDS IN BREASTFEEDING

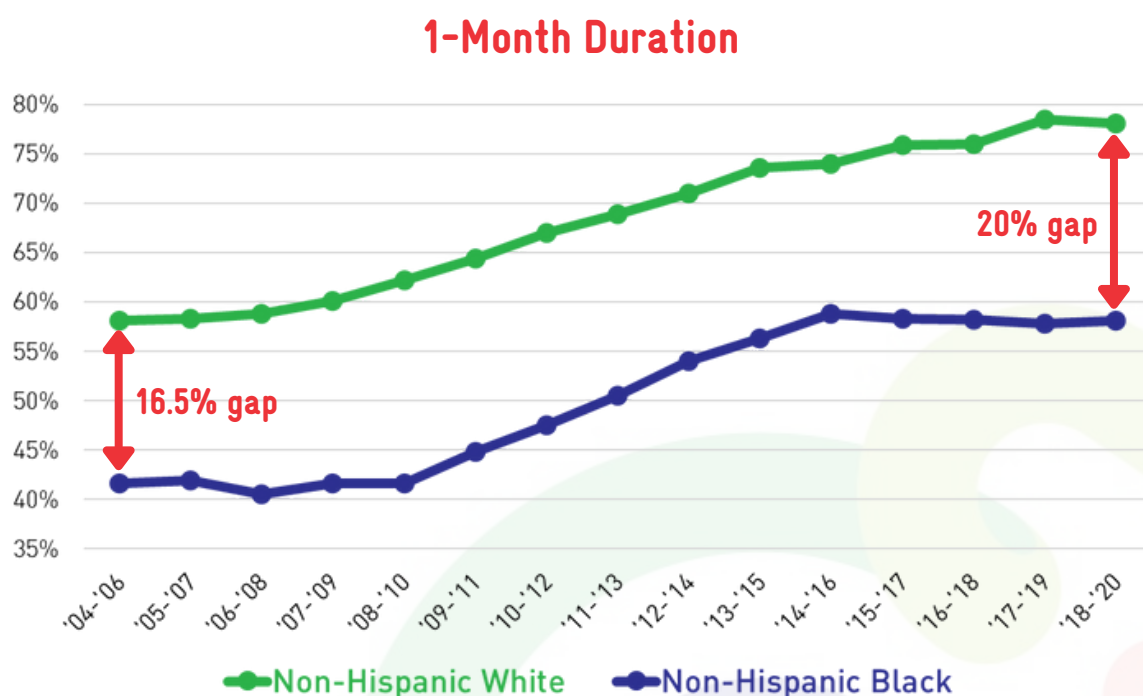
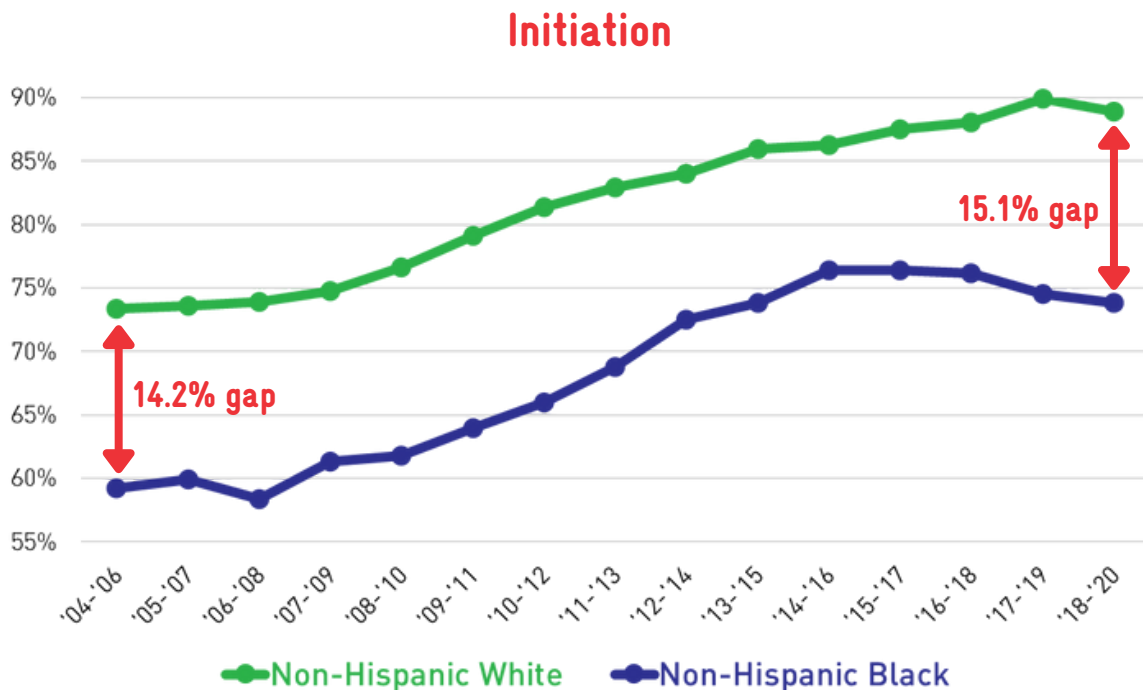
WIC Initiation by Race & Ethnicity



Source: Source: Michigan PNSS 2012-2021

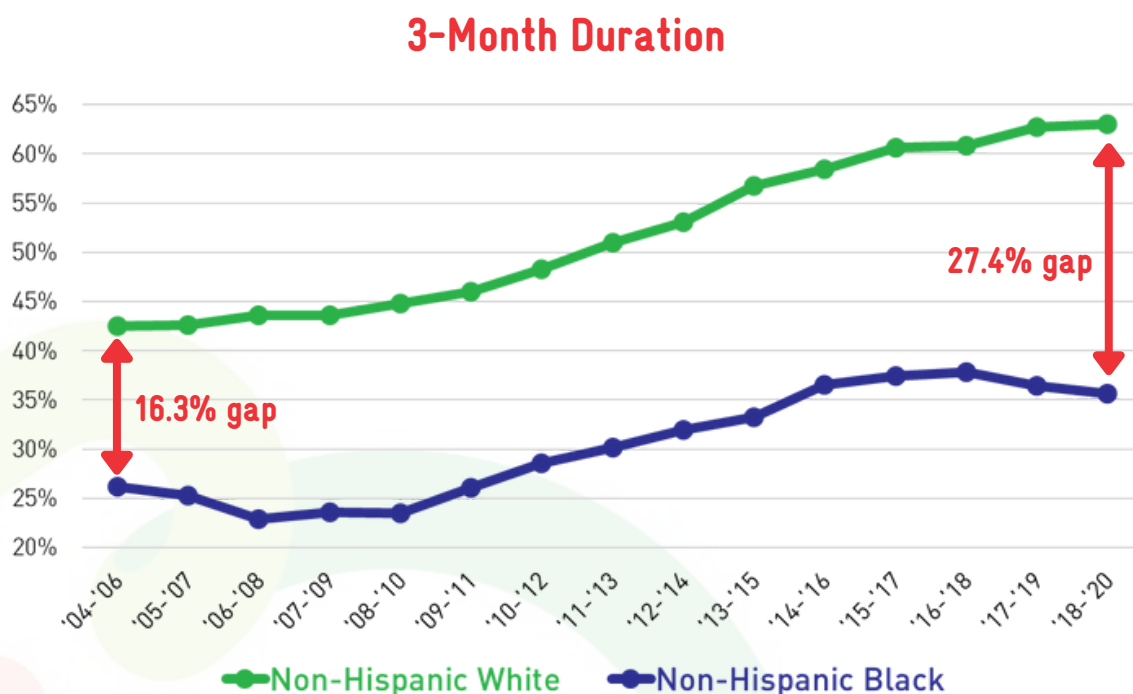
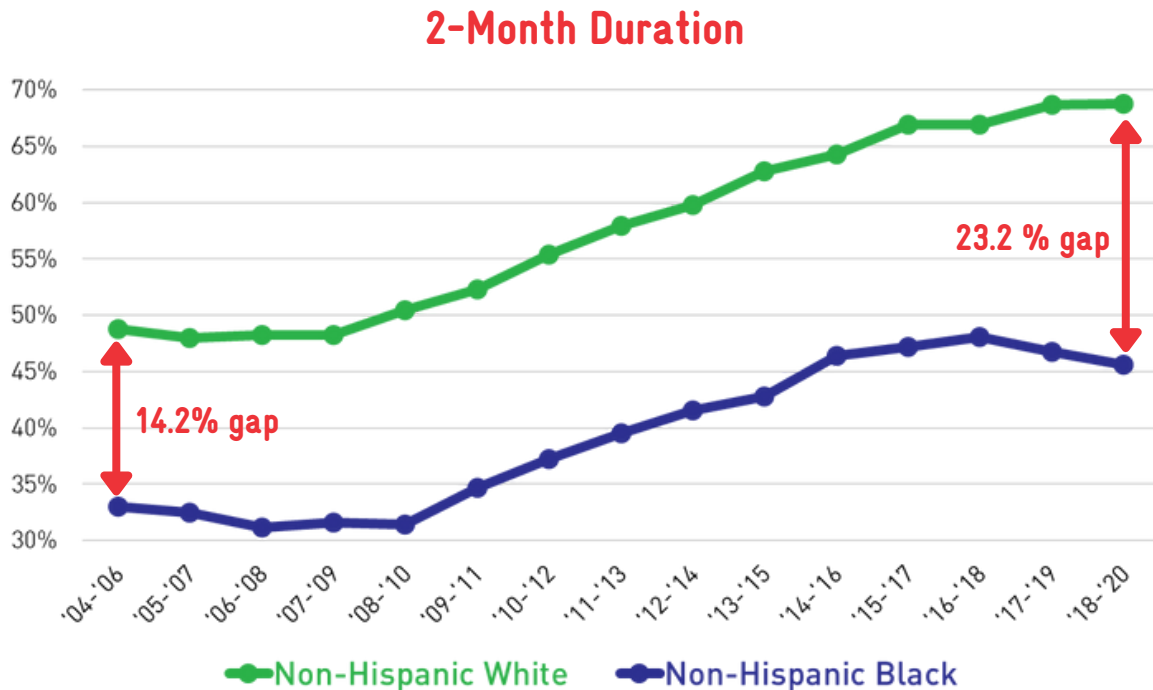
Disparity in Breastfeeding Rates

Comparison Between All Michigan Non-Hispanic White & Non-Hispanic Black Mothers



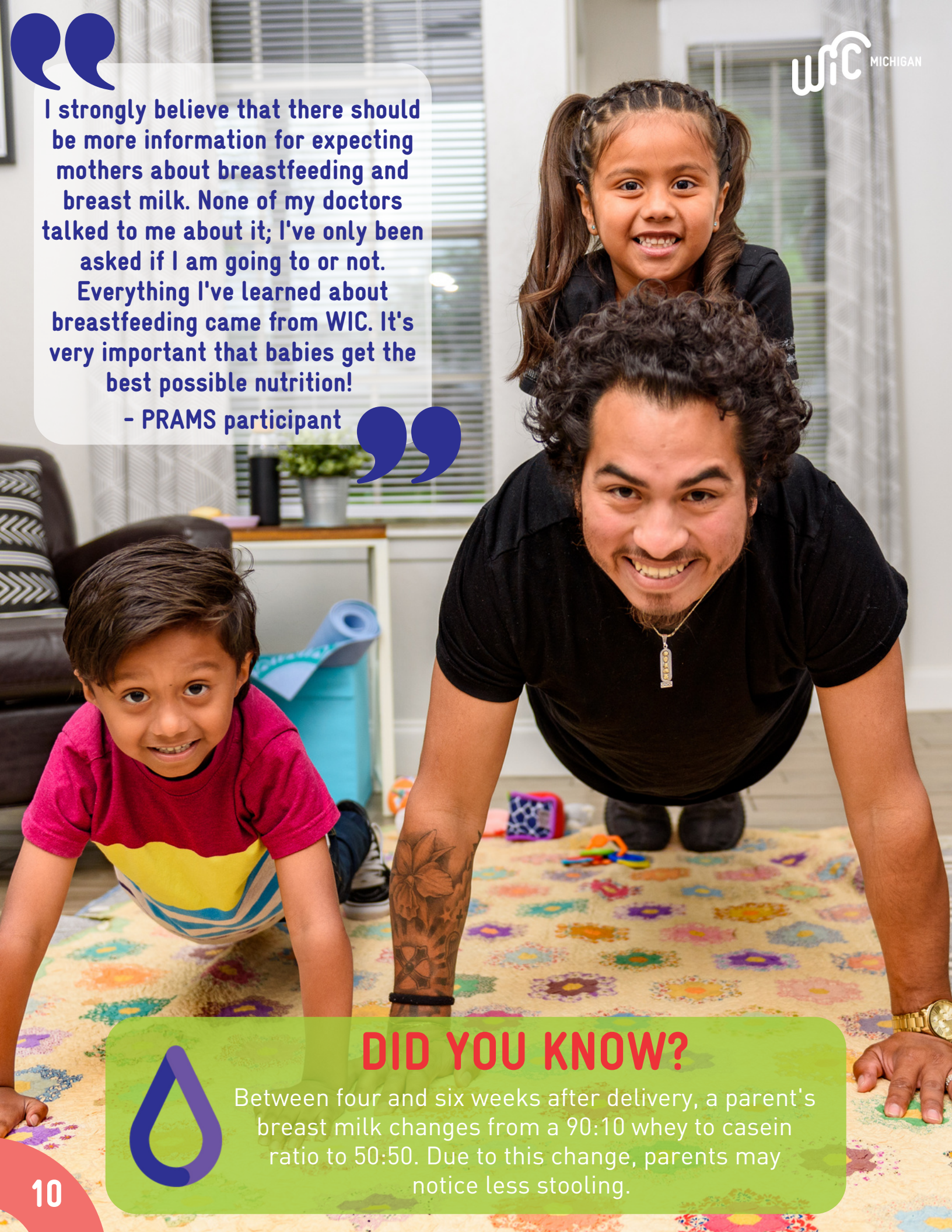
Disparity in Breastfeeding Rates

Comparison Between All Michigan Non-Hispanic White & Non-Hispanic Black Mothers



I strongly believe that there should be more information for expecting mothers about breastfeeding and breast milk. None of my doctors talked to me about it; I've only been asked if I am going to or not. Everything I've learned about breastfeeding came from WIC. It's very important that babies get the best possible nutrition!

- PRAMS participant

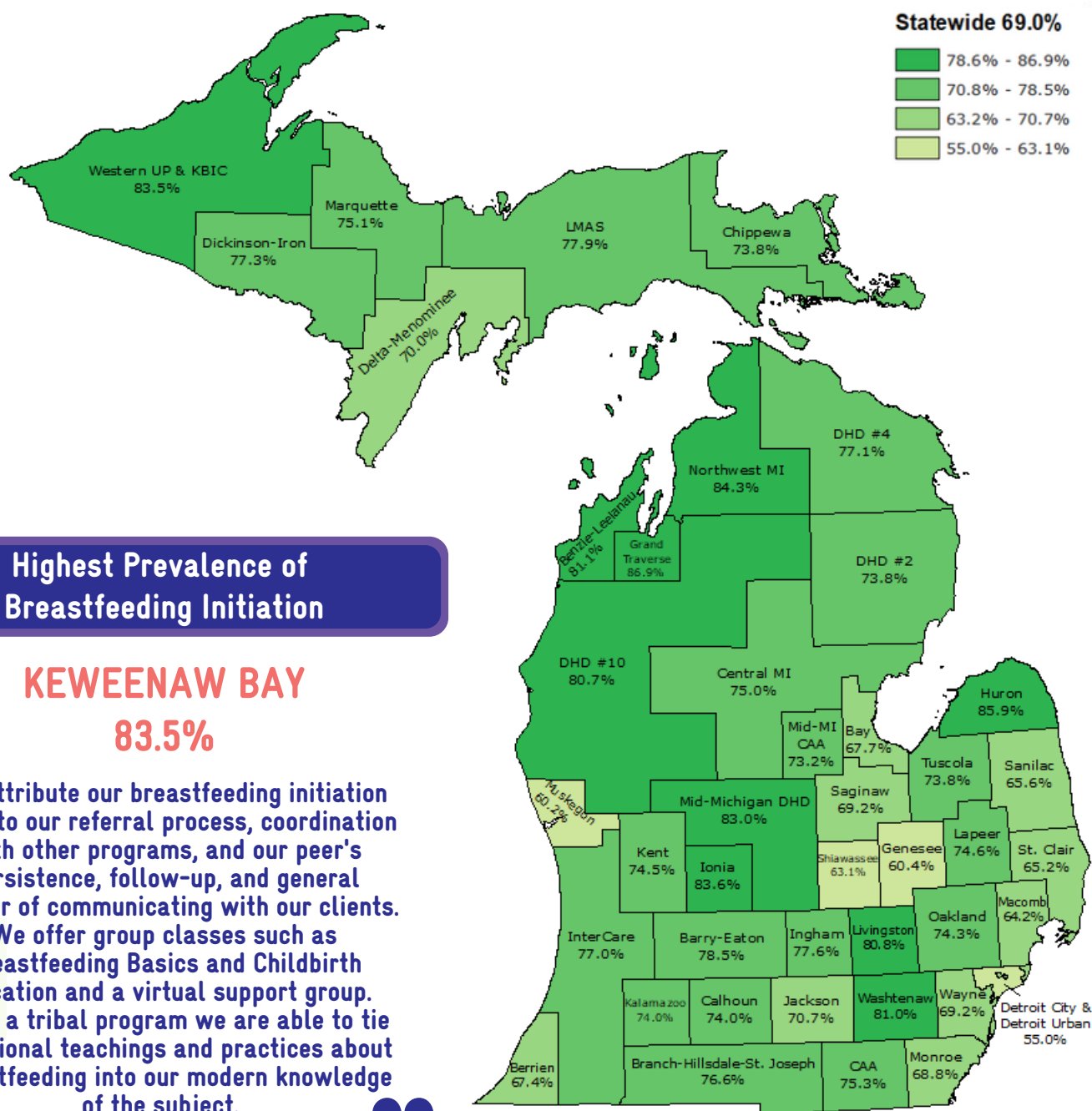


DID YOU KNOW?



Between four and six weeks after delivery, a parent's breast milk changes from a 90:10 whey to casein ratio to 50:50. Due to this change, parents may notice less stooling.

Initiation by Local Agency

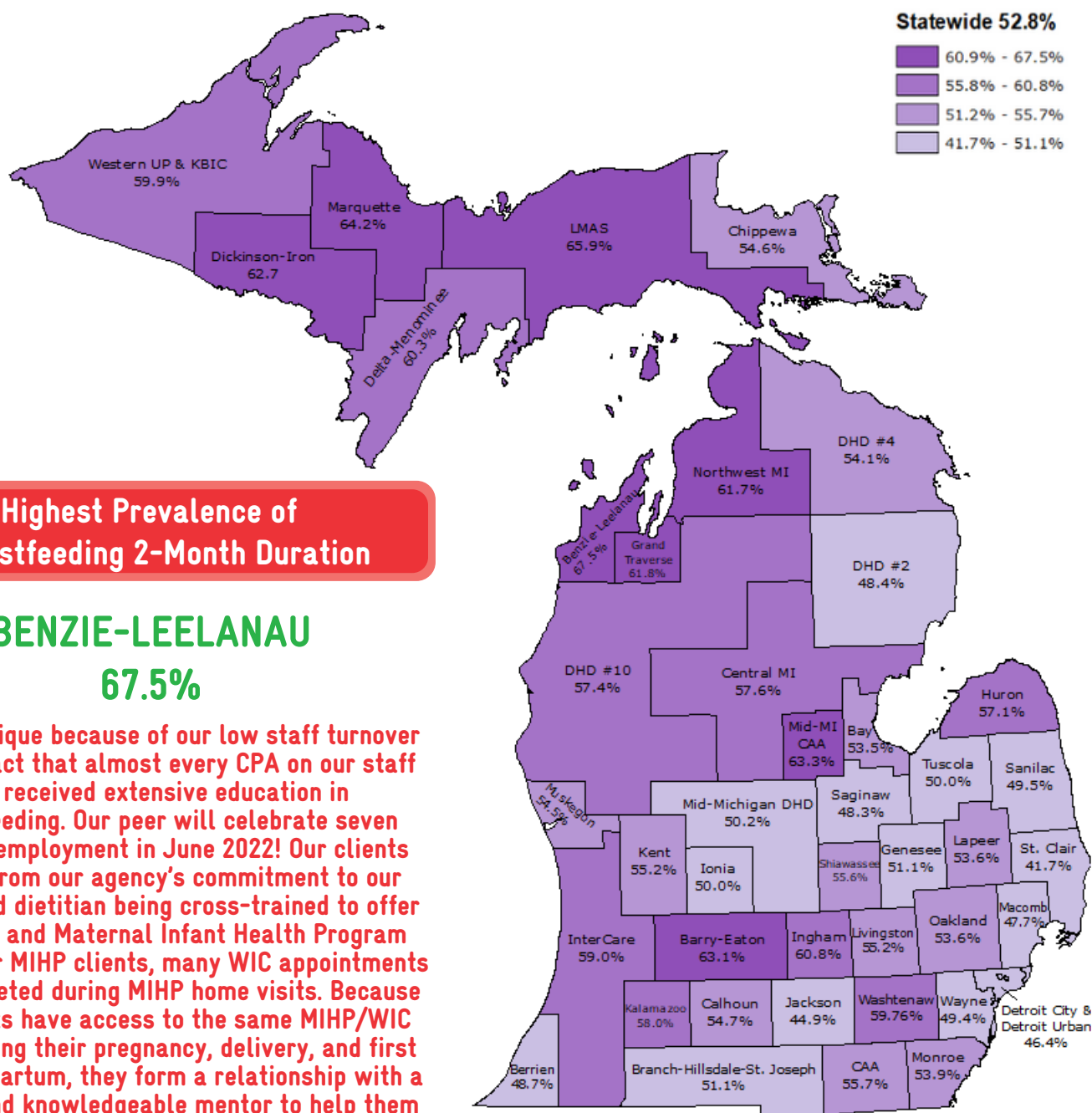


We attribute our breastfeeding initiation rates to our referral process, coordination with other programs, and our peer's persistence, follow-up, and general manner of communicating with our clients.

We offer group classes such as Breastfeeding Basics and Childbirth Education and a virtual support group. Being a tribal program we are able to tie traditional teachings and practices about breastfeeding into our modern knowledge of the subject.

-Heather Wood, Acting WIC Coordinator
-Miranda Mukka, Breastfeeding Peer

2-Month Duration by Local Agency



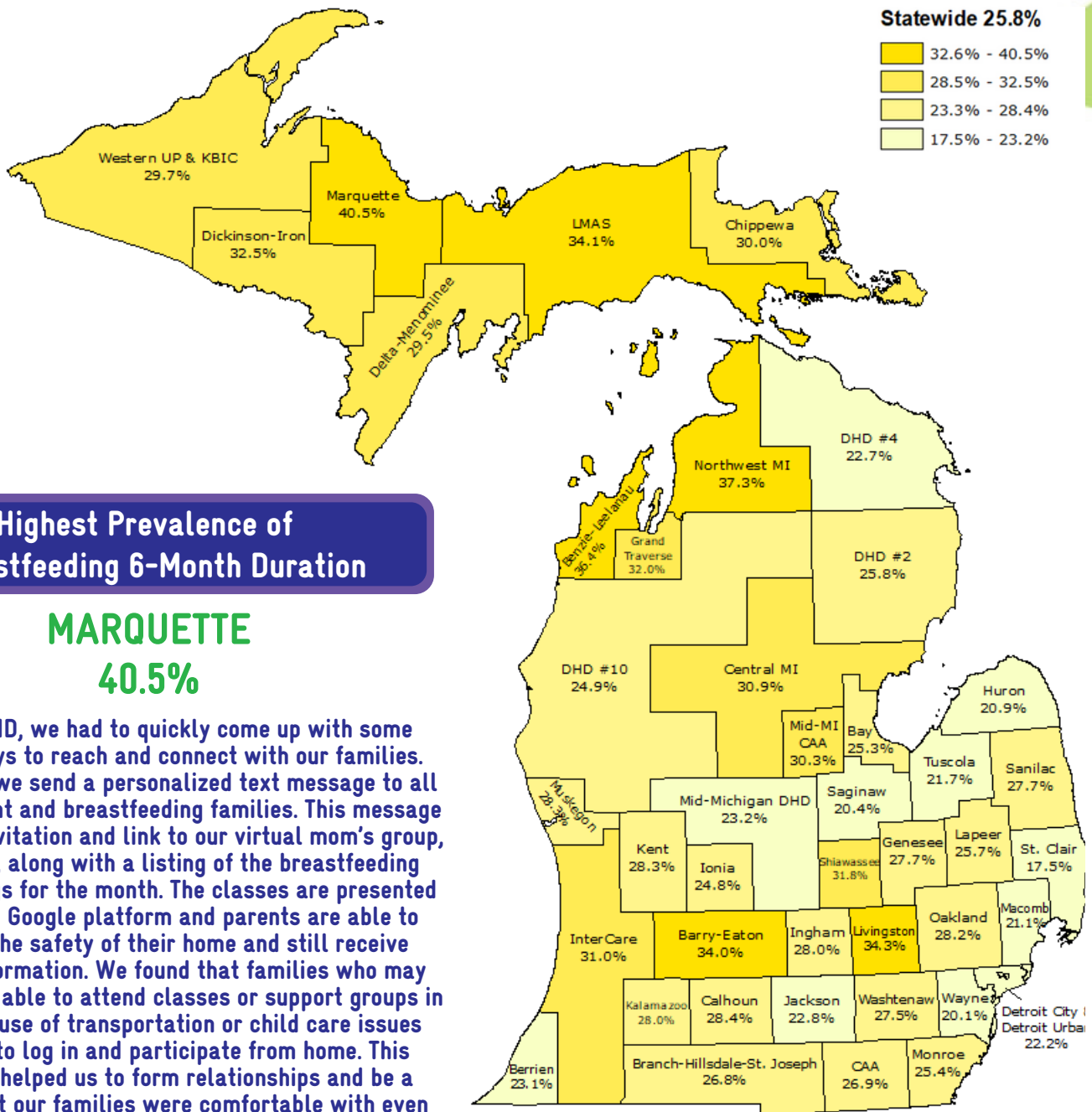
Highest Prevalence of Breastfeeding 2-Month Duration

BENZIE-LEELANAU
67.5%

We are unique because of our low staff turnover and the fact that almost every CPA on our staff has received extensive education in breastfeeding. Our peer will celebrate seven years of employment in June 2022! Our clients benefit from our agency's commitment to our nurses and dietitian being cross-trained to offer both WIC and Maternal Infant Health Program (MIHP). For MIHP clients, many WIC appointments are completed during MIHP home visits. Because our clients have access to the same MIHP/WIC nurse during their pregnancy, delivery, and first year postpartum, they form a relationship with a trusted and knowledgeable mentor to help them reach their goals!

-Autumn Jurek, Personal Health Supervisor
-Mariah Kaufman, RD, WIC Coordinator

6-Month Duration by Local Agency



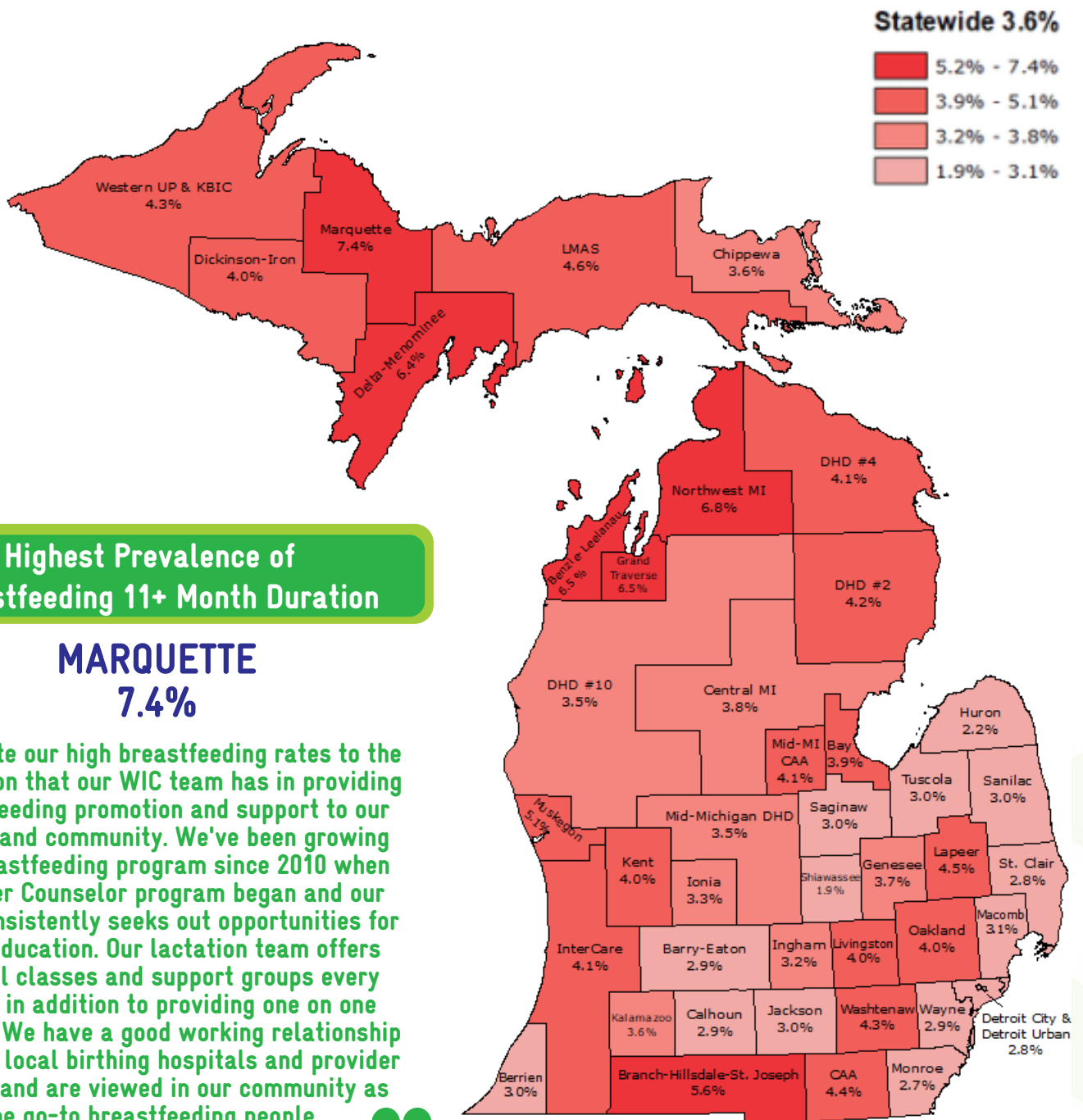
Highest Prevalence of Breastfeeding 6-Month Duration

MARQUETTE
40.5%

During COVID, we had to quickly come up with some creative ways to reach and connect with our families. Every month we send a personalized text message to all of our pregnant and breastfeeding families. This message includes an invitation and link to our virtual mom's group, Baby Bistro, along with a listing of the breastfeeding class offerings for the month. The classes are presented live through Google platform and parents are able to remain in the safety of their home and still receive valuable information. We found that families who may not have been able to attend classes or support groups in person because of transportation or child care issues were able to log in and participate from home. This connection helped us to form relationships and be a resource that our families were comfortable with even though we had never met in person.

- Linda Marshall, IBCLC
- Sarah DiLernia, Breastfeeding Peer Counselor

11+ Month Duration by Local Agency



Highest Prevalence of Breastfeeding 11+ Month Duration

MARQUETTE
7.4%

I attribute our high breastfeeding rates to the dedication that our WIC team has in providing breastfeeding promotion and support to our clients and community. We've been growing our breastfeeding program since 2010 when our Peer Counselor program began and our staff consistently seeks out opportunities for more education. Our lactation team offers several classes and support groups every month in addition to providing one on one support. We have a good working relationship with our local birthing hospitals and provider offices and are viewed in our community as the go-to breastfeeding people.

-Jolene Spencer RN, BSN, CLC
WIC Coordinator



DID YOU KNOW?

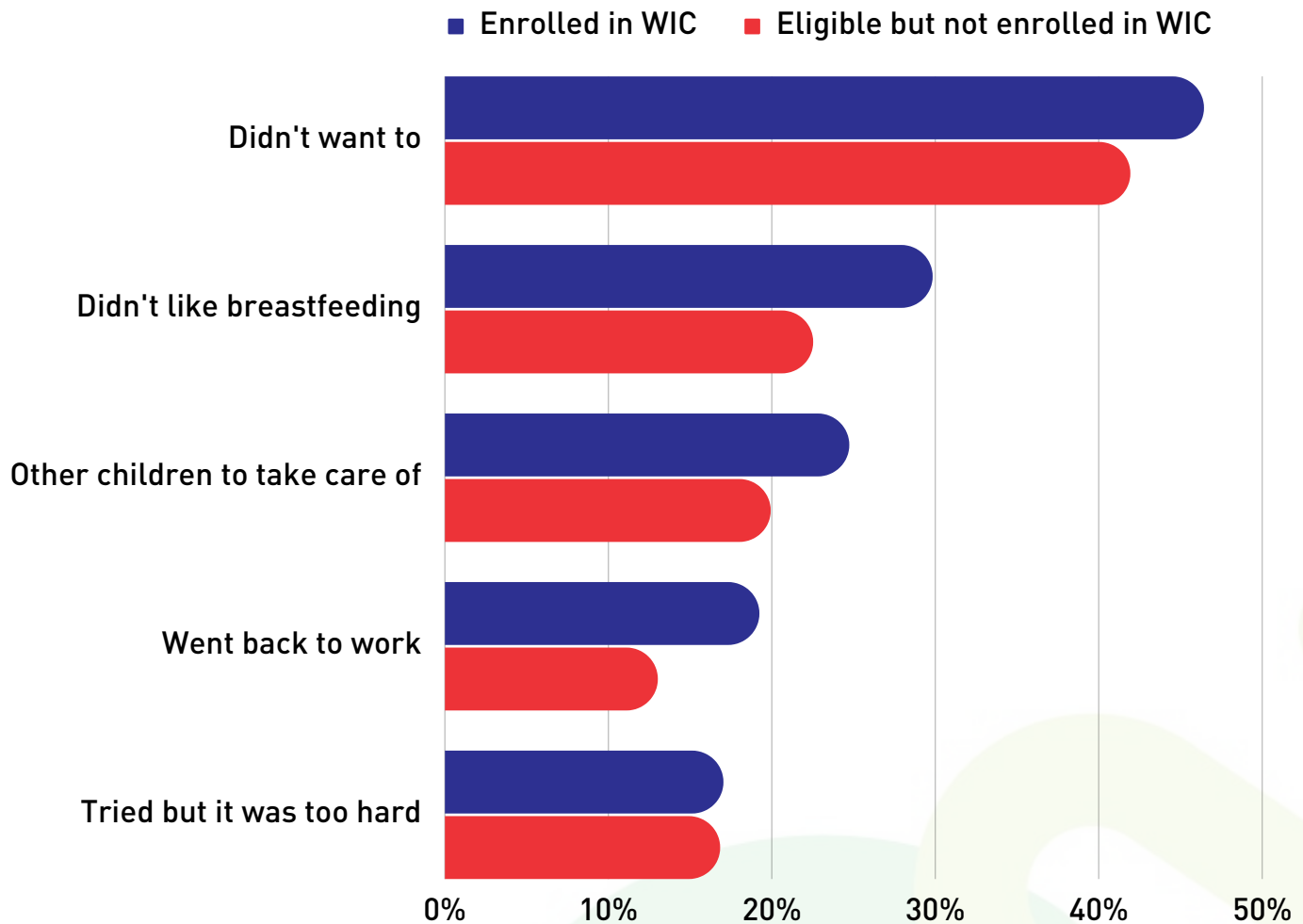


An infant goes through noticeable changes in their sleep cycle around one month after delivery. They may enter active/light sleep more frequently, during which a baby may wiggle, open their eyes, and even vocalize. Sound familiar? You've got it! These sound like hunger cues! If given a few minutes, an infant may fall back into still/deep sleep on their own.

Breastfeeding Barriers

Comparison Between Those Enrolled In WIC & Eligible But Not Enrolled In WIC During Pregnancy

Initiation

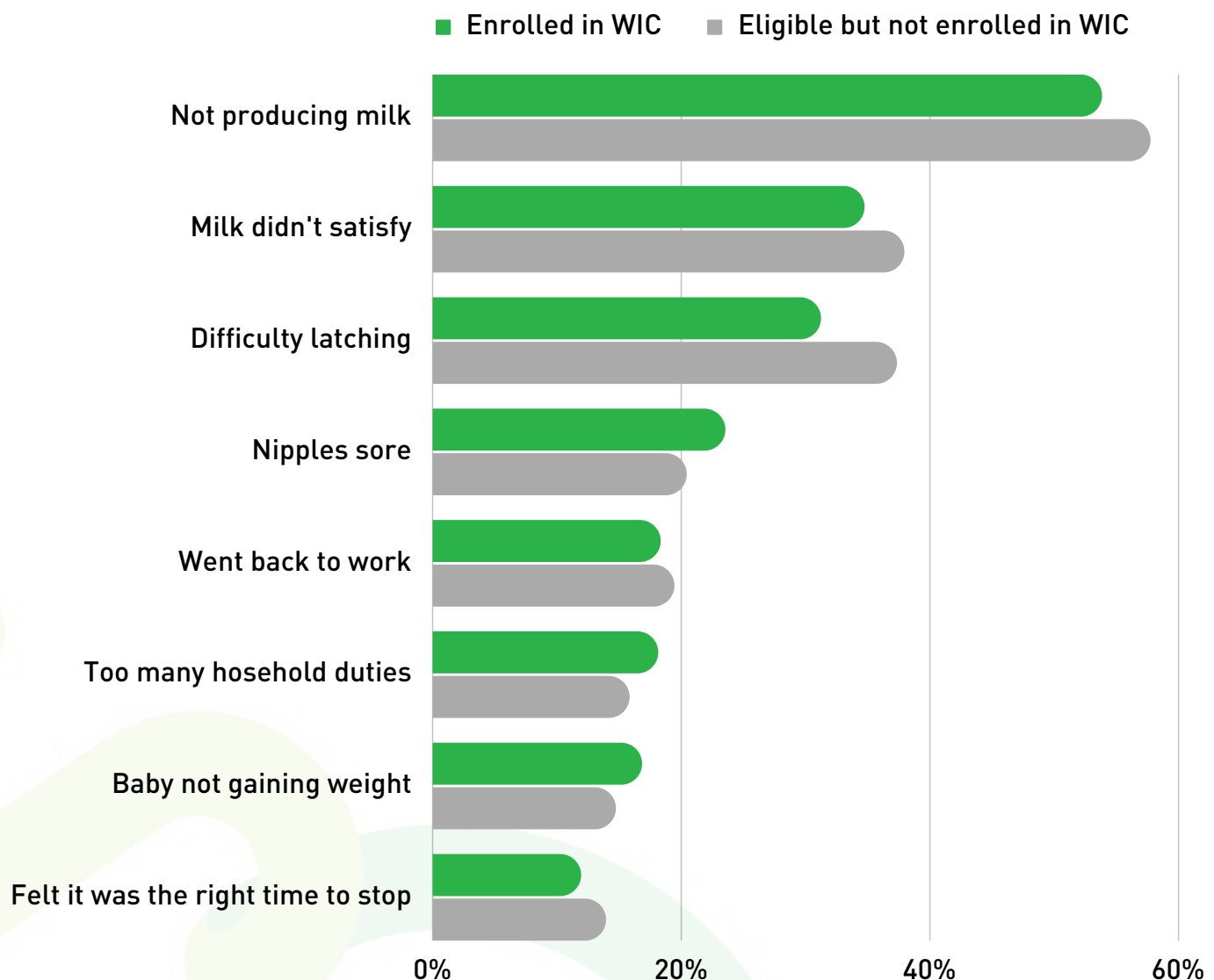


Source: Michigan PRAMS 2016-2020

Breastfeeding Barriers

Comparison Between Those Enrolled In WIC & Eligible But Not Enrolled In WIC During Pregnancy

Continuation



Breastfeeding Peer Counselors

What is a Breastfeeding Peer Counselor?

Breastfeeding Peer Counselors (BFPCs) add a critical dimension to WIC's efforts to help parents initiate and continue breastfeeding. BFPCs provide a valuable service to their communities by addressing the barriers to breastfeeding through education, support, and role modeling.



100+

PEER COUNSELORS SUPPORT
FAMILIES ACROSS MICHIGAN

119,645

CONTACTS MADE BY
PEERS

28

BFPCs TRAINED AS
SENIOR PEERS

114

BF STAFF ATTENDED
THE REGIONAL PEER
TRAINING

138

BFPCs, PEER MANAGERS, AND
REGIONAL LACTATION
CONSULTANTS ATTENDED THE
STATE PEER UPDATE

Breastfeeding Peer Counselors

2021 WIC Breastfeeding Award of Excellence Winners

Each year, the Food and Nutrition Service WIC program grants the WIC Breastfeeding Award of Excellence (formerly known as the Loving Support Award of Excellence). The award program was established to recognize local WIC agencies that have provided exemplary breastfeeding promotion and support activities. The intent is to provide models and motivate other local agencies to strengthen their breastfeeding activities, and ultimately, increase breastfeeding initiation and duration rates among WIC participants.

The award is given at three levels of performance that build on one another: Gold, Premiere, and Elite. This approach recognizes agencies that include those that are demonstrating model practices, as well as those who are at varying stages of implementing outstanding breastfeeding promotion and support practices.

District Health Department #10
Health Department of Northwest Michigan
Oakland Livingston Human Service Agency (OLHSA)



SPECIAL RECOGNITIONS

To Peers who have 10+ years working for WIC

LaSaundra (Denise) Beasley
Anna Brock
Edye Galvez
Jennifer Gudith
Danica Howard
Erica McLeod
Linda Marshall
Irasema Martinez
Cheryl Polk
Kelly Rutz
Kristen Sytek
Colleen Unsal
Keva Williams



Trainings and Certifications for Michigan WIC Staff



43

ATTENDEES OF
BREASTFEEDING
COORDINATOR TRAINING



46

IBCLCS

LEVEL 3
BREASTFEEDING
STAFF

103



21

BREASTFEEDING
BASICS
ATTENDEES

ADVANCED
CLINICAL
SKILLS
ATTENDEES

177



68

MILK
EXPRESSION
TRAINING
ATTENDEES

CLS TRAINING
ATTENDEES

30



51

ATTENDEES OF
BREASTFEEDING PEER
MANAGER TRAINING



670

WIC STAFF RECEIVED
BREASTFEEDING TRAINING
THROUGHOUT THE YEAR



161

ANNUAL WIC CONFERENCE
BREASTFEEDING SESSION
ATTENDEES





DID YOU KNOW?

It is normal for an infant around four months of age to become easily distracted while nursing. It may be helpful for parents to find a quiet space with less side conversations and family activity.



DID YOU KNOW?

Infants around nine months old may go through a phase of stranger and separation anxiety. Parents should anticipate giving their baby a little extra love, comfort, and patience.

APPENDIX

Data Resources

The Michigan Breastfeeding Plan

Breastfeeding Rate and Duration Report

The Biannual Breastfeeding Rate and Duration Report is a point-in-time ad hoc report which provides the breastfeeding duration and rate for all local WIC agencies across the state. The report depicts infants' duration of breastfeeding and shows the drop off of clients at each breastfeeding duration interval, thus highlighting critical points of intervention for breastfed clients. A count and rate are provided for each breastfed duration interval.

PNSS

The Pregnancy Nutrition Surveillance System (PNSS) is a public health surveillance system that describes the nutritional status of low-income pregnant, postpartum or nursing people enrolled in federally-funded maternal and child health and nutrition programs. In Michigan PNSS, data is collected solely from WIC clients. Self-reported demographic, behavioral, and health information is collected at the local WIC agency and verified by a nurse, registered dietitian, nutritionist, or other health professional. Anthropometric measurements (height, weight, and birthweight), clinical nutritional indicators status (i.e. hematology measurements), and breastfeeding practices are also collected.

PedNSS

The Pediatric Nutrition Surveillance System (PedNSS) is a public health surveillance system that describes the nutritional status of low-income infants and children enrolled in federally-funded maternal and child health and nutrition programs. In Michigan PedNSS, data is collected solely from WIC clients. Self-reported demographic, behavioral, and health information is collected at the local WIC agency and verified by a nurse, registered dietitian, nutritionist, or other health professional. Anthropometric measurements (height, weight, and birthweight), clinical nutritional indicators status (i.e. hematology measurements), and breastfeeding practices are also collected.

PRAMS

The Michigan Pregnancy Risk Assessment Monitoring System or PRAMS is a project that, with help from our partners at the Centers for Disease Control and Prevention (CDC), gathers high quality, population-based data about maternal attitudes and experiences for all mothers before, during, and after pregnancy. With the data collected from this survey, we can help improve the health of mothers and their babies throughout the State of Michigan.

H.U.G. Your Baby

Based on child development, lactation and pediatric literature, H.U.G. (Help, Understanding, Guidance) Your Baby's trainings and resources help parents (and the professionals who serve them) understand a baby's body language in order to prevent and solve problems around eating, sleeping, crying, and parent-child interaction and to promote breastfeeding duration.

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at:

<https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

(1.) mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410; or

(2.) fax: (833) 256-1665 or (202) 690-7442; or

(3.) email: program.intake@usda.gov

This institution is an equal opportunity provider.

